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this pate

Form PTO-4 (Rev. 6/99)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	DT		10-28-00
O.I.P.E. CLASSIFIER	120	. 5	11/14
FORMALITY REVIEW	H·T	913	/12/05/no
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

	Rejected	N Non-elected	
=	Allowed	Interference	3
_	(Through numeral) Canceled	A Appeal	
÷	Restricted	O Objected	

Claim   Date   Claim   Claim	
S2   S2   S3   S3   S3   S4   S5   S5   S5   S5   S5   S5   S5	
52   102   103   103   104   105	
S2   S2   S3   S3   S3   S4   S5   S5   S5   S5   S5   S5   S5	+++
53	
S	+++
6	+++
Se	+++
9	
10	+
111	+++
13	+
13	
15	+++
16	+++
17	+-+-
19	
20	$\prod$
21 71 121   72 122 123   23 73 123   24 74 124   25 76 125   26 76 126   27 127 127   28 78 128   29 79 129   30 80 130   31 81 131   32 82 132   33 83 133   34 84 134   35 85 135   36 86 136	
72   122     23   72     73   124     24   74     25   75     26   76     27   127     28   78     29   79     30   80     31   81     81   131     32   82     33   132     34   84     35   85     36   86	╂╌╂╌╂╌
23	+++
25	111
26 76 126   27 77 127   28 78 128   29 79 129   30 80 130   31 81 131   32 82 132   23 83 133   34 84 134   35 85 135   36 86 136	$\prod$
27 77 127   28 78 128   29 79 129   30 80 130   31 81 131   32 82 132   33 83 133   34 84 134   35 85 135   36 86 136	
28 78 128   29 79 129   30 80 130   31 81 131   32 82 132   33 83 133   34 84 134   35 85 135   36 86 136	╂╾╂╾╂╸
29	+++
31 81 131 32 32 32 32 32 33 34 34 34 34 35 35 36 36 36 36 36 36 36 36 36 36 36 36 36	
32 82 132   23 83 133   34 84 134   35 85 135   36 86 136	+++
34 83 133   35 85 135   36 86 136	+++
. 34	+++
36 136 136 136	
- L-1L-1L-1L-1L-1L-1L-1L-	+++
-	+++
38 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	+++
39 1 1 1 1 89 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
40 90 140	
41 91 141	+
42	+++
43 94 144	+++
45 95 145	+++
46 96 146	
97 147	1-1-1
48	+++
· 50 100 100 100 100 100 100 100 100 100	+++

If more than 150 claims or 10 actions staple additional sheet here

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